Missouri Board of Pharmacy

Newsletter I August 2026

NEW BOARD OFFICERS

Congratulations to our new Board officers! Board member Tammy Thompson, RPh., was elected as Board President at the July 2026 meeting. Christian Tadrus, Pharm.D., was re-elected to his third term as Board Vice-President.

PRESIDENT

Tammy Thompson, RPH.

President Tammy Thompson currently serves as a Clinical Pharmacist for Optum Rx. She previously served as Pharmacy Manager at Kmart Pharmacy. Ms. Thompson is a licensed pharmacist in both Missouri and Kansas, with certifications in Immunizations, Medication Therapy Management, and Diabetes Care and Education. Ms. Thompson holds a Bachelor of Science in pharmacy from the University of Missouri-Kansas City School of Pharmacy.

VICE-PRESIDENT

Christian S. Tadrus, Pharm.D.

Christian Tadrus, PharmD, is a primary care pharmacist and owner of independent community pharmacies and direct primary care clinics located in rural Missouri. His pharmacies work within their communities to improve health outcomes and address health disparities through partnered programs, clinical medication synchronization, adherence packaging, immunizations, point-of-care testing, comprehensive and targeted medication reviews, long-term care consulting and coordination of care.

Dr. Tadrus also serves as a Board Member of the National Community Pharmacists Association, on the Board of Managers for the Community Pharmacy Enhances Services Network (CPESN-USA), Board of the Partnership for DSCSA Governance (PDG), and Board of Trustees for the National Council for Prescription Drug Programs. Dr. Tadrus is a past-President of the Missouri Pharmacy Association and one of six appointees to the Missouri Joint Oversight Task Force for Prescription Drug Monitoring. Dr. Tadrus received his undergraduate degree in Business Administration and Management from Boston University and both a Bachelor of Science and a Doctor of Pharmacy from the St. Louis College of Pharmacy at the University of Health Sciences & Pharmacy in St. Louis.

2026 PHARMACIST RENEWALS

Pharmacist renewals are now open! All pharmacist licenses must be renewed by October 31, 2026. Scan the QR code or visit the MOPRO website at https://mopro.mo.gov/license/s/ to log into your MOPRO account and renew your license.

A few renewal notes:

- Photos are now printed on all Missouri pharmacist licenses. Upload a 2" x 2" with your MOPRO renewal application, if you don't already have a photo printed (accepted formats include jpeg, jpg, png, pdf, and webp up to 10 MB). A passport style photo is requested, however, other 2" x 2" photos may be used if clear and within size limits.

  Do **not** upload full driver's licenses or photos with pets/other people, as the entire uploaded picture will print on your license. NOTE: Staff cannot use photos submitted to the Board before the MOPRO licensing portal was implemented in January 2025; A new photo is needed if not currently printed on your license.
- Don't forget your continuing education (CE)! All pharmacists must complete thirty (30) hours of CE between 11-1-2024 and 10-31-2026. You will be asked to attest that you have completed the required 30 hours on your renewal application.

  The Board conducts a 100% CE audit of all pharmacists. **DO NOT RENEW IF YOU HAVE NOT COMPLETED YOUR CE**. False attestations may result in discipline and up to a $ 1,000 late CE fee. See Section B.3 of the Missouri Pharmacy Practice Guide for additional information on qualifying CE.
- Pharmacists can renew/refile your Notification of Intent to Immunize, Notification of Intent to Administer Medication by Prescription Order, and Certificate of Medication Therapeutic Plan Authority (Medication Therapy Services or "MTS" certificate) by selecting "Yes" to the specific questions on your 2026 MOPRO renewal application. This process has been integrated into the MOPRO renewal application. A separate application/form to renew a NOI or a MTS certificate is no longer required. Visit the MOPRO Licensee Search page at https://mopro.mo.gov/license/s/license-search to search for your license and print/verify proof of your MTS or NOI status.

MEDICATION THERAPY SERVICES UPDATE

Effective August 1, 2026, the "Medication Therapy Services" (MTS) designation **will not be printed** on pharmacist licenses. Instead, MTS status will show on the MOPRO licensee search page rather than printing on your physical pharmacist license (see example below). Visit the MOPRO Licensee Search page at https://mopro.mo.gov/license/s/license-search to search for your license and print/verify proof of your MTS status.

2026 NEW LEGISLATION

New legislation enacted in the 2026 legislative session will be effective on August 28, 2026. The below summary highlights a few key legislative changes that relate to pharmacy practice:

(This list is not exhaustive and does not include a full summary. See the related statutory provisions for full compliance information.)

Vaccine Authority: Section 338.010.1(4) has been amended to allow pharmacists to order and administer vaccines approved by the U.S. Food & Drug Administration (FDA), as of January 1, 2026. The prior January 1, 2023, FDA approval date has been removed. The new provisions will now allow pharmacists to administer RSV vaccines under § 338.010, under the pharmacist's authority.

- Section 338.010 excludes and does not apply to vaccines for cholera, monkeypox, Japanese encephalitis, typhoid, rabies, yellow fever, tick-borne encephalitis, anthrax, tuberculosis, dengue, Hib, polio, rotavirus, and smallpox. Pharmacists cannot administer excluded vaccines without a prescription *(a Notification of Intent to Administer Medication is also required)*.
- Pharmacists immunizing under § 338.010.1(4) must have a current Notification of Intent (NOI) on file with the Board. Pharmacists can administer respiratory syncytial virus (RSV) vaccines as authorized by § 338.010 if you have a current and valid NOI on file with the Board; A new NOI is not required. Search for your license on the MOPRO Licensee Search page to verify your NOI status (https://mopro.mo.gov/license/s/license-search).
- The Board's immunization rule, 20 CSR 2220-6.050, needs to be updated to reflect the new January 1, 2026, FDA approval date. Section 338.010 supersedes the Board's rule. Effective August 28, 2026, pharmacists can administer FDA authorized vaccines approved as of January 1, 2026, pending the rule change.
- If immunizing by protocol, make sure your protocol includes the RSV vaccine and/or any other vaccine approved as of January 1, 2026. **An immunization protocol is allowed but no longer required.*
- RSV vaccines must be given in compliance with CDC guidelines when administered under the pharmacist's own authority or a protocol. The Board recognizes the U.S. Center for Disease Control and Prevention's (CDC) guidelines for RSV vaccines are different from current manufacturer's recommendations. Rule 20 CSR 2220-6.050 provides *"vaccines must be administered in accordance with current [CDC] and the manufacturer's guidelines, provided CDC guidelines shall control in the event of a conflict."*

- Revised § 338.010 allows the Board of Pharmacy and the Missouri Board of Registration for the Healing Arts (BOHA) to authorize future FDA approved vaccines pursuant to a joint rule promulgated by both boards. Monitor the Board's website for any future rule updates.

Pharmacist Prescribing of Medical Devices: Section 338.206 allows a pharmacist to prescribe medical devices as authorized by joint rules promulgated by the Board of Pharmacy and BOHA. This new prescribing authority is a significant advancement for pharmacist practice and recognizes a pharmacist's skill, education, and training.

Section 338.206.1 defines a "medical device" as equipment that is furnished by a home supplier or home health agency, and meets the following conditions:

(1) Is a device classified by the U.S. Food and Drug Administration as a Class I or Class II device under 21 U.S.C. Section 360c and its implementing regulations under 21 CFR Parts 860 to 892;
(2) Is primarily and customarily used to serve a medical purpose;
(3) Generally is not useful to an individual in the absence of an illness or injury; and
(4) Is appropriate for use in the home.

The Board has begun initial discussions with BOHA on the implementing rule, which is required by statute to be promulgated on or before **February 28, 2027**. Pharmacists cannot prescribe devices under § 338.206 until the joint rule is promulgated; Monitor the Board's website for upcoming rule information.

Expanded Medication Therapy Services: New § 338.012 was enacted which allows pharmacist with a certificate of medication therapeutic plan authority (MTS certificate) to provide expanded MTS services specifically for influenza, group A streptococcus, and COVID-19 medication therapy. Joint rules are required with the Board of Pharmacy and the Missouri Board of Healing Arts to implement the new allowances.

Section 338.012 does not change/modify current MTS authority pursuant to a MTS physician protocol under § 338.010. Pharmacists may continue to perform MTS services for influenza, group A streptococcus, and COVID-19 under a MTS protocol with a licensed physician, as allowed by § 338.010 and Board rules 20 CSR 2220-6.060 to 20 CSR 2220-6.080. However, § 338.012 may allow the Board to expand MTS authority for the designated therapies, which could possibly include clinical activities, such as test-to-treat for flu, Group A strep and COVD-19 therapy (with or without a MTS protocol). Board suggestions will need to be approved by/jointly promulgated with the Missouri Board of Healing Arts; Monitor the Board's website for future rule updates.

Non-Resident Entity Licensure: Currently, all non-resident drug distributors, drug outsourcers, and third-party logistics providers (3PLs) must be licensed in their home states to be eligible for licensure in Missouri. Several states no longer license drug distributors and/or 3PLs, since the enactment of the federal Drug Supply Chain Security Act (DSCSA). Additionally, other states accept FDA registration for drug outsourcers, in lieu of a specific state license.

Section 338.333 has been amended to allow the Board to accept a valid drug distributor accreditation from the National Association of Boards of Pharmacy (NABP), if a state license is not issued in the entity's home state. Questions regarding the new provisions can be sent to: pharmacy@pr.mo.gov. See NABP's website for Drug Distributor accreditation information.

Epinephrine Sales/Distribution: Missouri's allowances for distribution to, and possession of epinephrine by, school districts and "authorized entities" have been expanded. Effective August 28th, § 167.627, § 167.630, § 167.635, and § 196.990, were amended to now allow the possession/distribution of an "epinephrine delivery system" by a school district or "authorized entity." The previous statutory allowances were limited to prefilled epinephrine auto syringes only. An epinephrine delivery system is defined in amended § 196.990 and § 167.627 as: "*a single-use device or system used for the delivery of a premeasured dose of epinephrine into the human body*."

As a reminder, § 196.990 allows a Missouri licensed physician to issue a prescription to allow an "authorized entity" to acquire/stock an allowed epinephrine delivery system *(additional training requirements apply)*. An "authorized entity" is defined in § 196.990.1 as:

> *Any entity or organization at or in connection with which allergens capable of causing anaphylaxis may be present including, but not limited to, qualified first responders, as such term is defined in section 321.621, facilities licensed under chapter 198, restaurants, recreation camps, youth sports leagues, child care facilities, amusement parks, and sports arenas. Authorized entity shall not include any public school or public charter school[.]*

Rx Cares: The August 28, 2026, sunset date on the Rx Cares for Missouri program has been removed. Under § 338.710, the Rx Cares for Missouri Program allows the Board to appropriate/award funding to promote medication safety and to prevent prescription drug abuse, misuse and diversion. The Rx Cares statewide medication destruction and disposal program is operated/funded through Rx Cares for Missouri. The statewide medication destruction provides a free DEA compliant medication destruction receptacle, inner liners, and disposal of medication up to 12x per year at no cost *(some restrictions apply)*.

Information on applying for an Rx Cares grant and the Rx Cares for Missouri program is available on the Board's website: https://pr.mo.gov/pharmacists-rx-cares.asp.

- With the Rx Cares program extension, new medication destruction receptacle inner liners have been authorized for current participants in the statewide medication destruction program and will be shipped to current participants directly from the Board's approved vendor.
- Application information for new program participants is available on the Board's website: https://pr.mo.gov/pharmacists-med-destruction.asp.

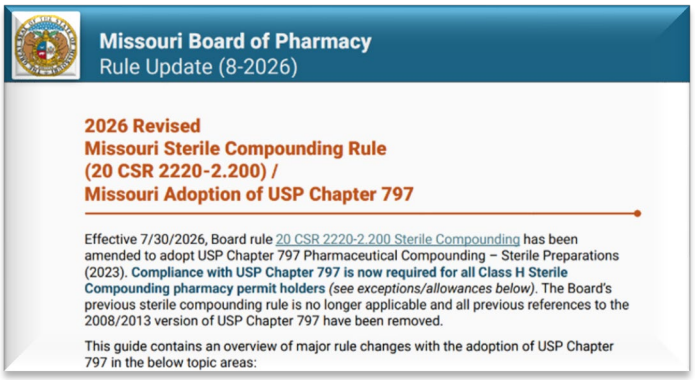
Questions? E-mail: Jennifer Boehm at MissouriBOP@pr.mo.gov

2026 REVISED STERILE COMPOUNDING & NUCLEAR PHARMACY RULES

Effective 7/30/2026, Board rule 20 CSR 2220-2.200 (Sterile Compounding) and Board rule 20 CSR 2220-2.500 (Nuclear Pharmacy) have been revised.

- 20 CSR 2220-2.200 has been amended to adopt USP Chapter 797 Pharmaceutical Compounding – Sterile Preparations (2023). **Compliance with USP Chapter 797 is now required for all Class H Sterile Compounding pharmacy permit holders,** subject to exceptions/ variances identified in the rule. The Board's previous sterile compounding rule is no longer applicable and all previous references to the 2008/2013 version of USP Chapter 797 have been removed.

  A 2026 Revised Sterile Compounding Rule Guidance document has been posted online with information on the new compliance requirements, a comparison of old/new rule provisions, and key exceptions to/variances from USP Chapter 797. Additional 2026 sterile compounding compliance resources are available on the Board's sterile compounding webpage: https://www.pr.mo.gov/pharmacists-sterile-compounding-rule.asp


Missouri Board of Pharmacy
Rule Update (8-2026)
2026 Revised
Missouri Sterile Compounding Rule
(20 CSR 2220-2.200) /
Missouri Adoption of USP Chapter 797
Effective 7/30/2026, Board rule 20 CSR 2220-2.200 Sterile Compounding has been amended to adopt USP Chapter 797 Pharmaceutical Compounding – Sterile Preparations (2023). Compliance with USP Chapter 797 is now required for all Class H Sterile Compounding pharmacy permit holders (see exceptions/allowances below). The Board's previous sterile compounding rule is no longer applicable and all previous references to the 2008/2013 version of USP Chapter 797 have been removed.
This guide contains an overview of major rule changes with the adoption of USP Chapter 797 in the below topic areas:

- 20 CSR 2220-2.500 (Nuclear Pharmacy) has been amended to adopt USP Chapter 825 (Radiopharmaceuticals – Preparation, Compounding, Dispensing, and Repackaging), subject to the exceptions/variances identified in the rule. Guidance documents will be posted for Class E pharmacies in September 2026. In the interim, licensees should review 20 CSR 2220-2.500 and USP Chapter 825 to ensure compliance.

FY26 TOP 5 INSPECTION VIOLATIONS

The violations listed below were the top pharmacy inspection violations in FY26:

- Medication/Prescription Errors: (Includes wrong medication, directions & quantity/Not dispensed as prescribed)
- Labeling Violations: Non-compliant labels; Full active/therapeutic ingredients names not on compounded prescription container)

NEW BOARD RULE ON PRESCRIPTION SALES

Except as otherwise provided by law/rule, pharmacy technicians must be under the supervision of a pharmacist when dispensing or providing final prescriptions to a patient. (*See the Missouri Practice Guide for exceptions/allowances for Class F Renal Dialysis pharmacies, Class L Veterinary pharmacies, Class N & Class O Automated Dispensing Systems, Class Q Charitable pharmacies, and Class R Remote Dispensing Site pharmacies*).

However, to assist patients and ensure prompt medication delivery, the Board recently promulgated rule 20 CSR 2220-2.197 which allows a pharmacist to authorize a pharmacy technician or intern pharmacist to dispense/provide a prescription that has been fully checked and verified by a pharmacist when a pharmacist is temporarily absent from the pharmacy subject to rule requirements.

Effective August 30, 2026, 20 CSR 2220-2.197 provides a pharmacist may authorize a pharmacy technician or licensed intern pharmacist to provide a new or refill prescription/medication order to a patient or the patient's authorized designee when a pharmacist is **temporarily absent** from the pharmacy if:

(A) The pharmacy has policies/procedures governing authorized activities during a temporary absence, and
(B) The prescription/medication order is completed, labeled, sealed and verified by a pharmacist or verified as authorized by law. No manual intervention with the prescription/medication order may occur or is allowed after the required pharmacist verification, other than preparing the finished and verified prescription for mailing, delivery, or storage (e.g., bagging), and
(C) The pharmacist reasonably believes pharmacy security and security of medication inventory will be maintained during the pharmacist's absence, and
(D) The patient is offered patient counseling as required by 20 CSR 2220-2.190. If the patient declines patient counseling, the counseling refusal must be manually or electronically documented in the pharmacy's prescription records.

If the patient requests counseling, the patient must be asked to wait for the pharmacist to return from break or asked to leave a telephone number for the pharmacist to contact the patient. If a contact telephone number is provided for counseling, **a pharmacist must promptly call the patient** at the provided telephone number to offer counseling, but **in no event later than twenty-four (24) hours** after dispensing. In the event of an emergency, a pharmacist must call the patient to offer counseling as soon as reasonably practicable, and
(E) For Class R Remote Dispensing Site pharmacies, counseling must be provided as required by § 338.215 and 20 CSR 2220-2.680. An offer to counsel is not sufficient.

For purposes of 20 CSR 2220-2.197, a pharmacist is considered "temporarily absent" from the pharmacy if the pharmacist is not within the confines of the permitted pharmacy/dispensing area. An authorized **temporary absence cannot exceed more than sixty (60) minutes in a rolling twelve (12) hour period**, provided the pharmacy permit holder may establish a shorter time-period if deemed necessary or appropriate. The **"No Pharmacist on Duty" sign** required by 20 CSR 2220-2.010 must be posted during the pharmacist's temporary absence if pharmacy technicians/intern pharmacists are authorized to provide checked/verified prescriptions under 20 CSR 2220-2.197.

Allowing a pharmacy technician or intern pharmacist to provide a checked/verified prescription to a patient under 20 CSR 2220-2.197 is **within the pharmacist's discretion and is not mandatory**. 20 CSR 2220-2.197(1) specifically provides: "The pharmacist on duty must have authority to restrict the sale/dispensing of a prescription/medication order during the pharmacist's temporary absence if deemed necessary or appropriate in the pharmacist's professional judgment," even if allowed by pharmacy policy.

Pharmacies allowing pharmacy technicians/intern pharmacists to provide medication to patients under 20 CSR 2220-2.197 must have current and written policies/procedures governing authorized activities during a pharmacist's temporary absence. See rule 20 CSR 2220-2.197 for a full list of policy/procedure requirements.

Permit holders and the PIC should make sure staff are trained on what is allowed during a temporary absence, how to handle patient requests for counseling, and handling instances where patient counseling may be required by the manufacturer or other federal requirements (e.g., REMS program).

20 CSR 2220-2.197 only applies to medication provided to patients by a Missouri registered pharmacy technician or licensed intern pharmacist. The rule does not apply to, or allow medication to be provided by, an unlicensed cashier or other unlicensed staff if a pharmacist is not present and supervising.

- Pharmacists are reminded that you are personally responsible for the final check and verification of a prescription. Pharmacists should not allow staff to dispense/sell a prescription when the pharmacist is absent if the pharmacist determines in their professional judgment that dispensing to the patient should wait until a pharmacist is present and supervising.
- The Board recommends that licensees document the date and time that a pharmacist calls a patient to provide patient counseling that is requested by the patient under 20 CSR 2220-2.197. Proof of compliance may be requested during an inspection/investigation.

PENDING RULES/RULES UNDER REVIEW

- 20 CSR 2220-2.020 (Pharmacy Permits)
- 20 CSR 2220-2.120 (Transfer of Prescription or Medication Order Information)
- 20 CSR 2220-2.140 (Prescription Services by Pharmacists/Pharmacies for Residents in Long-Term Care Facilities)
- 20 CSR 2220-6.060 to 6.090 (Medication Therapy Services Rule)

Monitor the Board's website for future rule updates.

COMPOUNDING COMMERCIALLY AVAILABLE PRODUCTS

Board rule 20 CSR 2220-2.400 Compounding Standards of Practice only allows compounding of a commercially available product or an essential copy thereof under certain conditions. The rule states:

> *(9) The compounding of a preparation that is a copy or essentially a copy of a commercially available product is prohibited except when there is a specific medical need for a particular variation of a commercially available compound for an individual patient as determined by the prescriber, or when a change or modification for a specific patient would produce for that patient a clinically significant difference between the compounded preparation and the comparable commercially available drug product, as determined by the prescribing practitioner. Documentation from the prescriber of the specific medical need or clinically significant difference for a specific patient must be maintained in the pharmacy's records. A prescription that identifies only a patient name and compounded preparation formulation is insufficient documentation for a pharmacy to rely upon to conclude that the prescriber made a determination regarding a specific medical need or clinically significant difference. A different formulation without a documented specific medical need or clinically significant difference is not sufficient.*
>
> *(A) For purposes of this rule, "essentially a copy of commercially available product" is a compounded preparation that has—*
>
> *1. The same active pharmaceutical ingredient(s) as the commercially available drug product;*
> *2. The same, similar, or an easily substitutable dosage strength; and*
> *3. The same manner of administration as the commercially available drug product.*
>
> *(B) For purposes of this rule, "easily substitutable" means the same or similar dosage strength can be achieved by administration of fractional or multiple doses of a commercially available drug product.*
>
> *(C) When compounding an otherwise commercially available product due to a drug shortage, the pharmacy must confirm and document the commercially available product is not available despite due diligence.*

The specific medical need or significant difference must be provided by the prescriber. A prescription that only identifies a patient's name and compounded preparation formulation is insufficient to support compounding a commercially available product.

Board Inspectors have observed multiple examples of general statements on prescriptions that raise concerns such as:

Example 1:

> **Medical Necessity:** The compounded medication has been prepared pursuant to the prescriber's signed order, based on the medical needs of a specific patient. The prescriber has determined that no commercially available product is suitable and that this preparation is required to achieve a clinically significant therapeutic outcome.

Example 2:

> *The compounded medications listed are made at the request of the prescribing practitioner whose signature appears above due to the medical need of a specific patient and the preparation is prescribed because the prescriber has determined that the preparation will produce a clinically significant therapeutic response compared to a commercially available product.*

In many instances, the same verbatim statement is listed on multiple prescriptions from different prescribers across the U.S. and appears to be a canned statement that may not be true or apply to the individual patient.

Board Inspectors recommend that prescriptions identify the specific medical need or clinically significant difference for the specific patient, instead of using a form statement (e.g., patient allergic to peanut oil). Talk to your prescribers to ensure compliance. Insufficient documentation or repeat canned statements without additional documentation may result in an official Board investigation and audit of all compounding records.

COMPOUNDING ERRORS INVOLVING PEDIATRIC PATIENTS

The Board has investigated multiple compounding errors which resulted in pediatric adverse events and pediatric patients seeking medical attention after receiving a much larger dose than prescribed. Examples include a weighing error involving a nifedipine suspension and two calculation/formula errors involving clonidine suspension.

Pharmacists should **double-check calculations and dosing** when preparing and dispensing compounded preparations, especially for pediatric patients. Whenever possible, the Board recommends a second person perform the double check. The Institute for Safe Medication Practices' (ISMP) *Targeted Medication Safety Best Practices for Community Pharmacy*

recommends obtaining and using a patient's weight to verify dosing of weight-based medications for pediatric patients.

Also be advised that Clonidine HCl 0.02mg/ml oral solution is currently commercially available (as of the date of this newsletter). A pharmacist must have a documented medical reason for compounding a commercially available product or an essential copy of a commercially available product. See "Compounding Commercially Available Products" above and Board rule 20 CSR 2220-2.400(9).

GOLD CERTIFICATES

Congratulations to our newest "gold certificate" pharmacists who have maintained a Missouri pharmacist license for 50 years:

- Wayne L. Antenen
- Garry B. Bartmess
- G. Michael J Bayuk
- Donald L. Brighton
- Kathryn L. Chilcutt
- Carol L. Early
- Sandra L. Flint-Smith
- Lynn M. Fromm
- Larry A. Gielow
- Ona K. Hawkins
- William M. Jones
- Jeffrey W. Junck
- Karen A. Kuchner-Zacheis
- Timothy W. Lakebrink
- August W. Larson
- Francis T. Leisure
- Victor M. Losson
- Stanley J. Martka
- Deborah A. Matlof
- Danny R. McHan
- Michelle Jo Messenger-Ogolin
- Stephen M. Moerlein
- C. W. Powell
- Paul J. Priestley
- Thomas J. Raftery
- Daniel J. Ray
- Gerald W. Roberts
- Gary M. Simmons
- Michael J. Sita
- **Gary F. Sobocinski****
- James Douglas Strauser
- Raymond G. Varnum
- James F. Weissler
- William G. Yount

***Former Missouri Board Member*

UPCOMING BD. MEETINGS

- September 9, 2026 (Conference Call)
- October 14 - 15, 2026 (Jefferson City)
- November 18, 2026 (Conference Call)

DISCIPLINE

DRUG DISTRIBUTOR:

- **Cee Kay Supply, Inc.**, #2026003195, Columbia, MO. Two (2) years probation. Failed to file a change of ownership application and distributed medical gas prior to renewing the permit. Section 338.055.2 (6) RSMo.
- **Ergo Midwest Inc.**, 2020034391, Independence, MO. Public Censure. Operated without a Manager-in-Charge for approximately one year and failed to timely notify the Board of a Manager-in-Charge change. Section 338.055.2 (6) and (13) RSMo.
- **Metalweld, Inc.**, #2026002717, Dexter, MO. Two (2) years probation. Operated on an expired license; distributed legend drugs or devices into Missouri without holding an active Missouri drug distributor registrant license. Section 338.055.2 (6) RSMo.
- **Nextra Health Inc**, #900655, St. Louis, MO. Public Censure. Operated without a Manager-in-Charge for over one year and failed to timely notify the Board of a Manager-in-Charge change. Section 338.055.2 (6) and (13) RSMo.
- **Refine Rx Collective**, #2026032460– St. Peters, MO. Two (2) years probation. Distributed legend drugs or devices into Missouri without holding an active Missouri drug distributor license. Section 338.055.2 (6) RSMo.
- **Young Dental Manufacturing Company**, #2026000671, Earth City, MO. Two (2) years probation. Operated on an expired license; distributed legend drugs or devices into Missouri without holding an active Missouri drug distributor license. Section 338.055.2 (6) RSMo.

DRUG DISTRIBUTOR REGISTRANT:

- **Felix Pharmaceuticals Pvt. Ltd., #2026005516, India**. Two (2) years probation. Operated on an expired license; distributed legend drugs or devices into Missouri without holding an active Missouri drug distributor registrant license. Section 338.055.2 (6) RSMo.

INTERNS:

- **Moylan, Madison A. #2022001106, St. Louis, MO.** Revoked; Violated the previous disciplinary order by failing to check in or appear for drug testing on multiple occasions, not being available to speak with an inspector, failing to submit a compliance report in January and July, 2025. Section 338.055.3 RSMo.

PHARMACISTS:

- **Becker, Shane M., #2006025285–Monett, MO.** Three (3) years probation. As pharmacist-in-charge, multiple inspection violations including sterile compounding violations. The pharmacy failed to record ambient temperatures, and remove expired product. Section 338.055.2(5), (6), (13), and (15), RSMo.

- **Barbour, Suzanne, #2013012590—Basehor, KS.** Public Censure. As pharmacist, failure to provide documentation and to maintain records demonstrating completion of required continuing education hours. Section 338.055.2 (3), (5) and (6), RSMo.
- **Hoelscher, Jessica S., #2021032277, St. Louis, MO.** Public Censure. As a pharmacist, diverted non-controlled medications from the pharmacy without a valid prescription. Section 338.055.2 (5), (6), (13) and (15) RSMo.
- **Kline, Stephanie, 2010028716, Kansas City, MO.** Probation until October 31, 2028. As a pharmacist, violated the previous disciplinary order by failing to complete continuing education hours, failing to provide a copy of the agreement to the employer, failing to submit disciplinary compliance reports for 2025, failing to take and pass the Practice Guide examination. Section 338.055.3 and 536.060 RSMo.
- **Morgan, Sharon H., #2007028064–Raytown, MO.** Revoked and cannot reapply for two (2) years. As pharmacist, failure to provide documentation and to maintain records demonstrating completion of required continuing education hours. Section 338.055.2 (3), (5) and (6), RSMo.
- **Morrison, Evan R, #2020018411, Lake Ozark, MO.** Public Censure. As pharmacist-in-charge, diverted non-controlled medications from the pharmacy without a valid prescription. Section 338.055.2 (5), (6), and (13) RSMo.
- **Ogork, Grace, #2021047422—Midlothian, TX.** Public Censure. As pharmacist, failure to provide documentation and to maintain records demonstrating completion of required continuing education hours. Section 338.055.2 (3), (5) and (6), RSMo.
- **Ruse, Kevin T., #2016024471–Overland Park, KS.** Five (5) years probation. Found guilty of the Class E felony offense of Possession of Oxycodone by misrepresentation, deception, or subterfuge under 21 U.S.C. § 843(a)(3) in the United States District Court, District of Kansas, Case No. 2:24-cr-20075-HLT. Section 338.065 RSMo.
- **Sethi, Sumit, #2018026773–Houston, TX.** Revoked and cannot reapply for seven (7) years. As pharmacist, failure to provide documentation and to maintain records demonstrating completion of required continuing education hours. Section 338.055.2 (3), (5) and (6), RSMo.
- **Wenzel, Megan J, #2010023018, St. Joseph, MO.** Three (3) years probation. As pharmacist-in-charge, dispensed unauthorized prescriptions for herself and her family, and failed to label prescriptions dispensed from the pharmacy. Section 338.055.2 (5), (6), (13), and (15), RSMo.

PHARMACIES:

- **Becker Pharmaceutical Services d/b/a Old Town Pharmacy, #2014010847– Monett, MO.** Three (3) years probation. Multiple inspection violations including sterile compounding violations. The Pharmacy did not record ambient temperatures, and remove expired product. Section 338.055.2(5), (6), (13), and (15), RSMo.

- **Clarest Health 7931 LLC, #2022040569, Springfield, MO.** Surrendered license, allowed a pharmacy technician to work without a registration or pending application with the Board. Shipped prescriptions prior to the dispensed date shown in the pharmacy prescription processing software Section 338.055.2 (10) & (13) RSMo.
- **Hines Street Pharmacy, 2012001548, Republic, MO.** Three (3) years probation. Pharmacy dispensed prescriptions for refills of DisposeRx packets, COVID tests, and COVID-19 vaccines under a standing order which was not issued by DHSS or allowed by DHSS making the prescriptions invalid. Section 338.055.2 (5) and (13) RSMo.
- **HIS Pharmacy, #2005039824, Rainsville, AL.** Public Censure. Operated for over three (3) and a half years from a location other than what was licensed with the Missouri Board of Pharmacy. 338.055.2 (6) and (13) RSMo.
- **Omnicare of Kansas City, Kansas City, MO.** Probation until February 11, 2029. Violated previous disciplinary order. Failure to follow consultant recommendations to correct deficiencies related to the sterile compounding area. 338.055.3 RSMo.
- **Prime Healthcare Services - Kansas City LLC d/b/a St. Joseph Outpatient Pharmacy, #2015004637, Kansas City, MO.** Public Censure. Pharmacy failed to have Class J license and failed to follow Class J requirements. Section 338.055.1 and .2 (6) and (10) RSMo.
- **Town & Country Compounding and Consultation Services, LLC, #2023049425, Ramsey, NJ.** Public Censure. Operated for over eight (8) months under the supervision of a PIC who had not been designated with the Board. 338.055.2 (6) and (13) RSMo.
- **Walgreens #01996, #2023000856, Wood River, IL.** Public Censure. Operated for over 21 months under the supervision of a PIC who had not been designated with the Board. 338.055.2 (6) and (13) RSMo.
- **Walgreens #05624, #2000153869, Farmington, MO.** Three (3) years probation. Failure to maintain adequate security to deter theft of drugs and diversion of controlled substances. Section 338.055.2 (13) and (15), RSMo.
- **Walgreens #06678, #2023005774, Wes Des Moines, IA.** Public Censure. Operated for over one (1) year under the supervision of a PIC who had not been designated with the Board. 338.055.2 (6) RSMo.

THIRD-PARTY LOGISTICS PROVIDERS:

- **Sharp Clinical Services LLC, #2024000307– Bethlehem, PA.** Public Censure. Operated for over nineteen (19) months under the supervision of a MIC who had not been designated with the Board. 338.055.2 (6) and (13) RSMo.